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			· L	Jocelyn L.	Lee	(Depositor's name)
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				12/22/06	,	(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	A	TTORNEY DOCKET NO.	CONFIRMATION NO.
	10/728,455 12/05/2003		Kerry Bradley	AB-346U		9324
TITLE OF INVENTION			,			
APPLN. TYPE	SMALL ENTITY	ISSUÉ FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE F	EE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO NO	\$1400 ART UNIT	\$300	\$0	\$1700	12/29/2006
GETZOW, SCOTT M			CLASS-SUBCLASS			
07-00000						
Change of correspondence address or indication of "Fee Address" (37 CFR. 1363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  Tree Address 'indication for "Fee Address" indication form PTO/SB/12 Rev 03-02 or more recent) attached. Use of a Custemer Number is required.			2. For printing on the pastern froat page, list: (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of anging firm fluming as a member a registroof attorney or agend) and the aspines of up to land, to no mark under the printed. The name of up to land, to no mark under the printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						
PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
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Advanced Bionics Corporation			Sylmar, CA			
Please check the appropria	ate assignce category or	categories (will not be pr	inted on the patent) :	Individual Corpo	ration or other private grou	p entity Government
4e. The following fee(s) are submitted:  Since Fee  Publication Fee (No small entity discount permitted)  Advance Order - # of Copies			iii. Psyment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Psyment by reside earl Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Monte.  (enclose an extra copy of this form).			
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Typed or printed name Michael J. Bolan				Registration No.		
This collection of information is required by 37 CFR, 131 1. The information is required to obtain or trains a benefit by the public which is to file (and by the 1997C) to proceed an application. Confidentially is governed by \$1 U.S.C. 126 and \$1 CFR. 1.14 1. This collection is extinated to lot be 12 minutes to complete, instances or processing submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete the processing of the complete of						